

PLACE OF BIRTH

ARIZONA STATE BOARD OF HEALTH

County of Gila

BUREAU OF VITAL STATISTICS

State Index No. 117

District of _____

ORIGINAL CERTIFICATE OF BIRTH

Co. Registrar No. 104

Town of _____

Local Registrar's No. _____

or
City of Globe

(No. _____ St. _____ Ward)

FULL NAME OF CHILD Albert Lewis Schaeffer { Born YES
If child is not named, make Supplemental Report on blank obtainable from local registrar. { Alive ☒Sex of Child Male { Twin, Triplet or other _____ { and _____ { Number in order of birth _____ { Legitimate? yes { Date of Birth Feb. 13 1923
(Month) (Day) (Yr.)Full Name William Schaeffer
Residence Globe, Arizona
Color or Race White Age at last Birthday 38
(Years)
Birthplace Silver City, New Mex.
Occupation MinerFull Maiden Name Josephine Lopez
Residence Globe, Arizona
Color or Race Lat. Mex. Age at last Birthday 26
(Years)
Birthplace Tucson, Arizona
Occupation HousewifeNumber of Child of this mother 5 Number of children of this mother now living 5 Were precautions taken against Ophthalmia neonatorum? yes

CERTIFICATE OF ATTENDING PHYSICIAN OR MIDWIFE*

I hereby certify that I attended the birth of the above child, and that it occurred on Feb. 13 1923, at 7³⁰ P.M.

{ *When there is no attending physician or midwife, then the householder should make this return. }

(Signature) C. W. Adams

(Attending physician, midwife, householder*)

Given or Christian name added from a

supplemental report _____ 192 _____ Filed 2-16 1923 Address Globe, Arizona
B. S. Joy

LOCAL REGISTRAR.

COUNTY REGISTRAR.

Filed 3/6 1923 A True Copy

COUNTY REGISTRAR.

129 - 213 - 139